REPORT ID:	BNxxx0015	
REPORT NAME:	Health Insurance Termination Of Coverage Report	
PURPOSE:	Provides a list of employees who have ceased coverage by way of terminations, resignations, transfers out, leave of absence, reduced hours, layoffs, and death from the State Health Benefit Plan (SHBP).	
SORT BY:	Company	
CONTENTS:	Report ID	Employee Record Number
	Page Number	Employee Name
	Run Date	Deduction Code
	Run Time	Last Deduction Date
	Verification Message	Reason
	Termination Code	Effective Date
	HI Member ID (SSN)	
FREQUENCY:	Daily	
DISTRIBUTION/ RETENTION PERIOD:	InfoPAC/Document Direct	t – 90 Days
RESPONSIBILITY:	Control M or FSS	
NAVIGATION:	N/A	
JOB/PROGRAM NAME:	fsbnd035/BEN015X	

## PHOENIX HRMS BENEFIT REPORTS

 Company
 400 Ga.Dept. of Omni
 . STATE OF GEORGIA
 Report ID: BN4000015

 Page No.
 1

 HEALTH INSURANCE TERMINATION OF COVERAGE REPORT
 Run Date 12/11/2111

Run Time 18:14:22 \*\*\* Verification of this report prior to submission to SHBP is the responsibility of the end user. \*\*\*

 
 Term
 HI Member Code
 Empl
 Empl
 Last
 Effective Deduction
 Effective Deduction

 RETR
 284444128
 11148918
 1
 Peek,Betty J.
 XSHPP1
 11/15/2111
 Retirement
 11-DEC-2111

 TRAN
 414814181
 11241182
 1
 Tookie,Bobo
 XSHPP1
 11/15/2111
 Xfer Out To Differen
 11-DEC-2111